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ABSTRACT

In 1997, the Community Alternative Placement Scheme (CAPS) was organized by NCH Action for Children (Scotland) to provide family placements for youth who would otherwise enter or remain in secure care. This evaluation study assessed the extent to which CAPS met its goals during the first 3 years of operation and examined the program's impact on the youth placed. Core elements of CAPS included foster care provider payment equivalent to a reasonable salary, intensive support to carers, specialist training, time-limited placement, automatic entitlement to respite care, individualized programs, and educational support. The study followed 20 CAPS youth and a comparison sample of youth in secure care for 2 years after placement started. Data were gathered from case records and interviews with youth, foster carers, CAPS staff, local authority social workers, and managers. Findings revealed that in less than 3 years, CAPS became well established as a key fostering service, attracting people who would not otherwise have considered becoming foster carers. The placement length was revised from the initial 6 months to 6 to 12 months. Over time, the relationship between the carers and the project staff became clarified. CAPS demonstrated the feasibility of this foster care scheme in Scotland. Most of the placements did not end in accordance with planned duration or goals but others provided stable, positive experiences on an enduring basis. In nearly all CAPS placements youth, carers, and social workers thought youth had benefited, but progress measures and outcomes produced mixed results. Improving access to additional educational support and psychological services emerged as a key requirement in extending foster care's potential to provide family-based care for youth with significant difficulties. (Contains 11 references.) (KB)

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Fostering and Secure Care: An Evaluation of the Community Alternative Placement Scheme (CAPS)

Moira Walker and Malcolm Hill (Centre for the Child and Society, University of Glasgow), John Triseliotis (University of Strathclyde)

Introduction

In 1997 an innovative fostering project, the Community Alternative Placement Scheme (CAPS) was set up by NCH Action for Children (Scotland) to provide family placements for young people who would otherwise enter or remain in secure care. In developing this community based alternative to secure accommodation, NCH was responding to a recommendation of the Social Work Services Inspectorate report *A Secure Remedy* (SWSI, 1996).

Core elements of the new service were to be:

- carer payments equivalent to a reasonable salary
- intensive support to carers, available 24-hours
- specialist training
- time-limited placements
- automatic entitlement to respite care
- individualised programmes
- educational support.

Most of these features had been present in 'specialist' foster schemes for adolescents for 20 years or more (Shaw and Hipgrave 1983; Hill et al 1993; Triseliotis et al 1995), but CAPS was exceptional in its high fee levels and more comprehensive support arrangements. In addition it sought to extend the boundaries of foster care by placing young people who, according to many, were too difficult to manage in families.

Recognising the distinctiveness of the Project, the then Scottish Office funded an independent evaluation of the Project's first three years of operation. The study was carried out by the Centre for the Child and Society, University of Glasgow, in collaboration with Professor Triseliotis, University of Strathclyde.

Methodology

The research aimed to assess the extent to which the Project met its own goals and evaluate the impact of its work on the young people placed. Its purpose was to develop evidence based understanding of professional foster care's potential to provide a community alternative to secure placement. The study's design included several key elements:

- It was *longitudinal*, so that changes were charted in the Project's development and twenty young people followed for two years after their placement started.

- It involved *process evaluation*. This meant identifying how the implementation of the Project corresponded to its goals and exploring the ways in which distinctive aspects of the Project (such as pay and support) affected the fostering role and tasks.
- It included *evaluation of outcomes* for the young people and gathering of limited cost data.
- It had a '*quasi-experimental*' aspect, through following a comparison sample of young people in secure care over a similar period.

Data were gathered from case records and interviews with young people, foster carers, CAPS staff, local authority social workers and managers. Information from several of these sources was obtained on a sample of 20 young people (the first 20 admitted to the programme who agreed to participate) at three points during and after placement. Comparative data were assembled on 20 young people in secure accommodation. Young people's progress was assessed on the basis of information about their current circumstances and participants' assessments. Views about the overall development and operation of the Project were also obtained.

Development of the Project

CAPS added to the supply of foster carers by attracting people who would not otherwise have considered becoming foster carers.

In less than three years, the Project became well established as a key fostering service. Originally intended to provide a partnership service to two nearby local authorities, this plan was soon abandoned because of financial constraints in both. Instead the Project came to offer placements across much of Scotland, with about one third of Scottish authorities having at least one child placed with CAPS at any one time. By 2000, CAPS had more carers (28) and provided more placements (30+) than had been envisaged initially. (A total of 75 placements were provided over the study period.) More than half of the carers were new to foster care, but had relevant experience. Of the 28 carer households in August 2000, twenty-three were couples and five were single women. Among the couples, seventeen women and six men were main carers, which meant that they were required to be available on a full time basis. The geographical spread of carers and referring agencies meant it became usual for young people to be placed thirty miles or more from their home area.

Alongside this expansion in its scale of operation, other aspects of CAPS' development diverged from initial plans, including the types of young people referred, their age spread and the planned duration of placements. Increasingly, small numbers of admissions were made from the family home or foster care. The age spread has encompassed young people from 9 to 17, though each year only one or two of those placed were above or below the planned 12-16 range.

The original plan was for 6 months to be the usual placement length, though this was soon revised upwards to 6-12 months. In practice most young people who settled with their foster families were found to require even longer placements. This was partly because it took time to build the basis of trust through which young people could be helped to address long standing problems. Another difficulty was that when young people were ready to move on, suitable placements were often not available, for example long term foster families or supported accommodation.

The longer-term perspective accords with aspects of attachment theory which was reflected in the Project's approach (Howe, 1999), although behaviour management and ecological perspectives are also integral to the model. Unlike some schemes that have for example pursued a behaviour modification model (Hazel 1981; Hawkins and Breiling 1989), the Project has not been highly prescriptive in its recruitment criteria or approach to its work. Rather it has sought to work with a wide range of carers' existing strengths in a flexible way. However it was considered essential that carers were able to combine a capacity to empathise with young people and to confront difficult behaviour (e.g. related to aggression, drugs or sexuality). The carers vary in their orientation along such dimensions as nurturing/structured and inclusive/exclusive. Some emphasise their expertise and offer guidance, whereas others work alongside the young person in partnership.

Key elements of support were higher than usual levels of training, frequent consultation with Project staff, access to staff 24 hours a day and regular respite. Securing suitable educational placements proved a major obstacle, especially when young people moved to carers outwith their home authority. When no school or work placement was available, this added significantly to the stress in the placement. A planned educational support worker post had not been established, though funding for this continued to be sought. Key tasks would be to contribute to the planning and support of school placements, while also providing temporary part-time tuition for young people who had no school provision.

By establishing an intensive professional fostering service, CAPS faced long-standing issues in a new context. When carers are paid for doing a job, they can no longer be treated like benevolent volunteers following agency plans, as has been the case with more traditional forms of fostering. CAPS carers are expected to take on a high level of responsibility and to be involved as professionals in all key decisions. This has led to debates about whether they thereby become freelance agents equal to and separate from Project staff or front-line workers accountable to Project staff. Over time, the agency clarified its view that the foster carers are respected workers with considerable day to day discretion, but are line managed by Project staff.

Did the Project cater for young people in or close to secure care?

The Project aimed to provide alternative family care for young people 'close to secure', i.e. they were either at imminent risk of admission to secure accommodation or they needed a placement in order to come out of secure care. The majority of young people placed did indeed fulfil those criteria, though a significant minority did not. In two thirds of the main sample cases (N=20), either secure accommodation was being imminently considered at the point of placement or the young person came to CAPS from a secure unit. Comparison of 20 CAPS placements and 20 placements in secure residential accommodation revealed that the characteristics were very similar as regards age range, care careers, types of problems and levels of difficulty on the Strengths and Difficulties Scale (Goodman, 1994). Both samples also broadly reflected the composition of the secure care population as a whole (SWSI 2000). However, CAPS admitted more girls and fewer boys with serious offending problems. It appeared that the CAPS and secure populations did

largely overlap, but none of those referred to CAPS had been sentenced by the courts.

Evidently many local authority social workers have been sufficiently confident in the Project to refer certain young people 'close to secure'. However the comparison study suggested that workers responsible for young people in secure accommodation did not usually see family placements as appropriate for this group, especially at times of extreme crisis when the need for a secure placement arises. Both the social workers and the young people in secure care thought that expectations in a family home would heighten anxiety and the tendency to run away. In the longer term, some young people were thought likely to benefit from the personal commitment of carers and an experience of family life but social workers doubted that any carer would tolerate full-time the extreme behaviour and demands of some of these young people. This led some to suggest that part-time placements might be offered alongside residential provision.

Was the Project a success?

No carers left the scheme during its first three years of operation. Carers received a high level of remuneration, training and support. They particularly valued the availability of 24 hour support and regular respite.

CAPS has demonstrated that it is possible to establish a fostering scheme in Scotland, where local authorities are willing to pay fees for the service at a level dramatically higher than hitherto. It has shown that significant numbers of young people with very challenging behaviours can be kept in community placements. New types of carer have been recruited, which highlights the potential for fostering services to be expanded in order to meet children's needs and give more placement choice (Triseliotis et al 2000). During the first three years of its operation, all the carers were retained and expressed a strong commitment to the scheme. Some indicated that the levels of payment and support had been crucial in encouraging them to persist at times of severe crisis. Most saw the 24-hour availability of support as vital. The access to training has been exceptional in its amount and range and was highly valued by carers.

Did young people benefit?

Turning to assessments of placement outcomes, it is important to recognise that the seemingly straightforward question of whether a placement has been successful or not, broke down or not, is usually far from simple to answer (Rowe et al 1989; Triseliotis et al 1995). The same placement may be judged as positive, mixed or negative by different participants, the outcome may be quite different on one dimension compared with another, and the picture may change rapidly from one point in time to another. This complexity of impact was always likely to be great with an innovative project seeking to improve the lives of very vulnerable and damaged young people in a relatively short time. Not surprisingly then, findings indicated that placement outcomes were positive in some respects, but in others the benefits were less clear. Placement effectiveness was assessed through examining progress and end circumstances for individual young people. In addition consideration was given to the nature of the experience with CAPS and whether young people were thought to have benefited from the placement.

Longer placements produced better outcomes. This fitted with the views of many carers that it was essential to build up a relationship gradually before a young person was likely to accept guidance about changing their behaviour.

In view of the relatively small numbers involved, the evidence about *outcomes for individuals* provides an indication of foster care's potential but does not

constitute robust generalisable findings. Also the most detailed information relates to young people placed early in the Project's development. Undoubtedly a small number have been greatly helped. They were assisted to make major life-style or behaviour changes and to acquire skills and supports that would stand them in good stead in the transition to adulthood. Benefits were highest for those who established long term relationships with carers and would be able to rely on their support into adult life. It was expected that this would apply to a quarter of the sample. Six placements were continuing at the point when the field work ended.

In contrast, half the placements (n=10) ended within nine months, with over half (n=14) of the first 20 placements ending prematurely without their goals being met. Several of the endings were abrupt and traumatic. However no placement ended because the carer(s) made this decision unilaterally. Rather key professionals agreed the placement should not continue or the young person decided to leave, sometimes without giving prior notice. Five of the young people moved to other carers within the scheme.

Assessments of progress made over the two years of the study in relation to behaviour, emotional difficulties, self-esteem and education, training or work indicated that young people placed with CAPS were, on average, doing no better and no worse than those who had been admitted to secure accommodation. Each form of service catered for certain needs well. For example secure care was more equipped to manage and contain young people in crisis, while CAPS was more able to tackle longer term needs such as learning to take responsibility for behaviour and cope with community living.

Where young people were living at the time the research ended was one indicator of how CAPS had impacted on their lives. Details are outlined in Table 1.

Table 1 End Circumstances for Young People in Both Samples

End Circumstances	CAPS Sample	Secure Sample
Stable placement with parents or another relative	4	3
Own tenancy or Supported Accommodation	1	6
Foster Care	6 (CAPS) 1 (Local Authority)	1 (CAPS) 1 (Local Authority)
Residential School or Unit	2	3
Psychiatric/Therapeutic Unit	0	2
Homeless Accommodation	3	1
Prison	2	0
Insecure placement with relatives or friends	1	1
Secure Accommodation	0	2

Key expectations of CAPS placements were that they would enable young people to live in the community and provide stability. Table 1 indicates that by the time the research ended, all but four of the young people who started in CAPS were living in a community rather than institutional setting. In contrast seven of the young people who started off in secure accommodation remained in a form of residential care. However being in residential care did not

Most placements did not end in accordance with planned duration or goals and some finished abruptly, but others provided stable, positive experiences on an enduring basis.

Over two years from the start of placements, outcomes were similar for young people placed with CAPS and those admitted to secure accommodation. Thus CAPS had achieved similar results without the loss of freedom associated with secure care.

Compared with young people who started in secure care, fewer of those placed with CAPS had made the move to supported accommodation or their own tenancy by the time the research ended. A few had remained with carers and would be able to rely on their support indefinitely. However others were in less stable accommodation.

necessarily imply a poor outcome in that some young people from both samples were coping very well in schools and homes, with a few also returning home at weekends.

Differences between the two samples were more evident in the circumstances of young people who were aged 16 or over by the time the research ended. Whereas six of those who started in secure accommodation were living in their own tenancy or supported accommodation, this applied to only one young person from CAPS. A number of young people who had left CAPS somewhat abruptly had yet to achieve a stable base, with three living in homeless accommodation and one lodging with a series of relatives on a temporary basis. Another boy had recently achieved a more stable arrangement with relatives, having had no settled home base at the second round of the research. The outlook was much more promising for two young people who had remained in their CAPS placement beyond their 16th birthday and planned to settle in the carers' home area. The carers expected to provide on-going support to each of these young people. Though numbers are small, the findings indicate that moving away from their home area and outwith the mainstream care system made the transition to supported accommodation or own tenancies more difficult. This is an important consideration since three quarters of each sample required support towards independent living.

End circumstances in terms of education or work reflected the difficulties young people from both samples encountered in securing school, training or employment within mainstream provision. By the time the research ended, approximately half of each sample was attending no school, training or employment. However there were indications that placement with CAPS had been more helpful in this respect. Of 12 young people from the two samples who were coping in mainstream school (4) or college (8), nine had been placed with CAPS either from the start or on leaving the secure placement. Conversely almost a third of the secure sample (6) but only one of those placed with CAPS were still in specialist school provision.

Even when young people's subsequent circumstances were unpropitious, CAPS placements were considered by carers and social workers to have been valuable. They thought that all young people had benefited, half either fully or substantially. For some the experience of family living was considered valuable in itself, while others were thought to have gained a sense of self worth and confidence. In contrast, no benefits were identified by social workers for a quarter of the secure care placements.

In nearly all CAPS placements young people, carers and social workers thought the young people had benefited, but measures of progress and outcomes produced mixed results.

Young people also assessed CAPS placements more favourably, also highlighting differences in the nature of each type of placement. While half in both samples thought they had benefited from the placements, young people placed with CAPS talked of significant changes to an aspect of their lives or self esteem, whereas most young people in secure care simply said they had been kept safe. Three quarters of young people placed with CAPS said they had enjoyed the placement. Only three young people said they enjoyed being in secure care and some found it very stressful to be locked in.

What were the costs of CAPS compared to the alternatives?

The study was not designed to provide a detailed analysis of the costs of CAPS compared with alternatives, but indicative figures were estimated by the researchers. The basic weekly cost of CAPS placements was approximately

£850. However with additional expenditure for specialist education and transport, costs to local authorities could extend to approximately £1,400. These charges compared with around £1,000 for residential schools and £2,500 for secure accommodation. These costs exclude salaries for social workers but, according to most social workers in the study, supporting individual young people required approximately equal time, whether they were in CAPS or in a residential placement. Because the average CAPS placement lasts longer than a secure placement, the overall costs would not always be less. In the interviews with social workers and managers, the consensus was that there were savings compared to secure care. Nearly all local authority social workers and managers thought that the placements were worthwhile. Some were impressed at how young people had developed, while others valued the carers' capacity to engage, contain and cope with the young person, rather than identifiable improvements in the short or medium term. In many instances this reflected recognition of the intransigence of young people's difficulties.

What can foster care offer as an alternative to secure care?

The study findings highlighted that foster care can potentially provide an alternative to secure care in at least three key ways. The first option is to provide a time-limited substitute placement at the point when there is an actual or imminent requirement for secure care. A second approach is to provide a service which caters for the medium-longer term needs of young people whose serious difficulties have resulted in or are likely to result in admission to secure placement. A third arrangement is to provide part-time care alongside secure or other residential provision, thus affording some experience of family life for very challenging young people who could not otherwise cope in the community. CAPS set out to create the first option but in the event mostly provided the second and occasionally the third form of service. This is consistent with evidence that many young people in secure care have serious difficulties which require longer term individualised care (SWSI, 2000). The research indicated that, with appropriate support, foster carers can cater for very challenging young people. They are also potentially well placed to care for some young people who first encounter serious difficulties in adolescence and require intensive support to sustain mainstream school attendance and family relationships. However in community placements it is more difficult to control behaviour such as running away and keep some young people safe while in crisis.

Given the relatively small numbers included in the research, it was hard to draw definitive conclusions about what aspects of the fostering service were more crucial or what kinds of young people were most responsive. However, there was evidence that the high level of remuneration and support to carers enabled them to persevere in some very difficult circumstances. It was also apparent that the most successful placements had engaged young people over a considerable period, usually over 12 months, which was significantly longer than the project originally envisaged. In addition it became clear that the young person's positive motivation and commitment to the placement were essential for gains to be achieved. This would potentially exclude those who remain unmotivated and hard to reach. Moving away from their home area had given some young people the 'fresh start' they wanted. However it could also result in a loss of contact with family and friends and present young

Foster care and secure units offer complementary services. Future foster care projects should clarify whether their primary aim is to replace secure placement in the short term or to provide the longer term care which many young people considered for or admitted to secure care require.

Improving access to additional educational support and psychological services emerged as a key requirement in extending foster care's potential to provide family based care for young people with significant difficulties.

people moving to independent living with difficult choices about where they would choose to be housed. A few young people had greatly benefited from continuing support from carers after they returned to their home area.

The provision of appropriate external supports was also critical to determining placement effectiveness, notably in terms of support from field social workers, education and psychological services. Social workers, carers and CAPS staff considered that four-weekly meetings held between key professionals, carers and the young person were crucial to effective co-operation and planning.

Implications for policy and practice

The report's conclusions suggest that CAPS merits retention and replication, but it should be considered in advance whether future projects intend to provide a short, medium or long term alternative to secure care. In addition the critical importance of carer support should be recognised, especially providing 24-hour back up. Collaboration with local authorities and health services is equally important, in order to ensure that access to additional educational support and psychological services is sufficient. The report suggests that future projects should aim to recruit a large and sufficiently diverse group of carers to cater for the range of young people's needs and preferences, ideally providing a choice of local or more distant placements.

For further information about the research and the full report, on which this Interchange is based, please contact the Centre for the Child and Society, University of Glasgow, Lilybank House, Bute Gardens, Glasgow G12 8RT (telephone 0141-330 5923).

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